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*Receipt*

File No.: 3158/0J019

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re application of:

Hsien-Ying CHOU

Serial No.: 09/767,955

Group Art Unit: 2858

Filed: January 24, 2001

Examiner: TBA

For: **AUTO-IMPROVING DISPLAY FLICKER METHOD**

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**REQUEST FOR CORRECTED FILING RECEIPT**

Hon. Commissioner of Patents  
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Attn.: Application Processing Division  
Customer Correction Branch

Sir:

A Filing Receipt (copy attached) for the above captioned application has been received by Applicant's attorney. Upon review of this document error(s) were noted. The Patent Office is respectfully requested to make the following correction(s) and to issue a new and correct Filing Receipt.



The Attorney Docket No. for this Application is incorrect.

"0941-0214P-SP" should be - - 3158/OJ019- -. The changes are marked on the enclosed copy of the filing receipt.

Dated: May 30, 2001

Respectfully submitted,

Ya-Chiao Chang  
Reg. No. 43,407  
Attorney for Applicant(s)

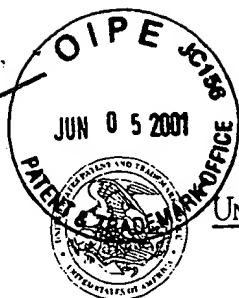
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## UNITED STATES PATENT AND TRADEMARK OFFICE

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APPLICATION NUMBER	FILING DATE	GRP ART UNIT	FIL FEE REC'D	ATTY. DOCKET NO.	DRAWINGS	TOT CLAIMS	IND CLAIMS
09/767,955	01/24/2001	2858	710	0941- 0214P SP 3158/05019	3	14	2

CONFIRMATION NO. 2789

2292

BIRCH STEWART KOLASCH & BIRCH  
8110 GATEHOUSE ROAD  
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FALLS CHURCH, VA 22042

## FILING RECEIPT



\*OC000000005822266\*

Date Mailed: 03/05/2001

Receipt is acknowledged of this nonprovisional Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Office of Initial Patent Examination's Customer Service Center. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts" for this application, please submit any corrections to this Filing Receipt with your reply to the Notice. When the PTO processes the reply to the Notice, the PTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).

## Applicant(s)

Hsien-Ying Chou, Hsinchu, TAIWAN;

## Continuing Data as Claimed by Applicant

## Foreign Applications

TAIWAN 89123262 11/04/2000

If Required, Foreign Filing License Granted 03/02/2001

Projected Publication Date: 05/09/2002

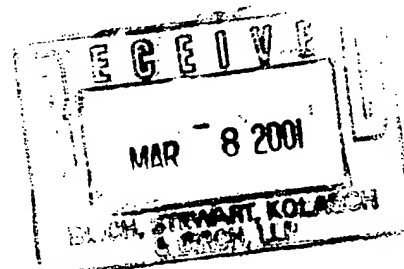
Non-Publication Request: No

Early Publication Request: No

## Title

Auto-improving display flicker method

## Preliminary Class



Computer \_\_\_\_\_  
D&D Entry \_\_\_\_\_  
Looseleaf \_\_\_\_\_  
Folder \_\_\_\_\_  
Card \_\_\_\_\_



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Bib Data Sheet

CONFIRMATION NO. 2789

<b>SERIAL NUMBER</b> 09/767,955	<b>FILING DATE</b> 01/24/2001 <b>RULE</b>	<b>CLASS</b> 345	<b>GROUP ART UNIT</b> 2673	<b>ATTORNEY DOCKET NO.</b> 3158/OJ019	
<b>APPLICANTS</b> Hsien-Ying Chou, Hsinchu, TAIWAN; <b>** CONTINUING DATA *****</b> <b>** FOREIGN APPLICATIONS *****</b> TAIWAN 89123262 11/04/2000 <b>IF REQUIRED, FOREIGN FILING LICENSE</b> <b>GRANTED ** 03/02/2001</b>					
Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged		<b>STATE OR COUNTRY</b> TAIWAN	<b>SHEETS DRAWING</b> 3	<b>TOTAL CLAIMS</b> 14	<b>INDEPENDENT CLAIMS</b> 2
<b>ADDRESS</b> YA- CHIAO CHANG 805 THIRD AVENUE NEW YORK, NY 10022					
<b>TITLE</b> Auto-improving display flicker method					
<b>FILING FEE RECEIVED</b> 710	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		